

FRUIT AND VEGETABLE PROGRAMS

VENDOR REQUEST FOR LOGON IDENTIFICATION (ID) AND PASSWORD DOMESTIC ELECTRONIC BID ENTRY SYSTEM (DEBES)

LOGON ID REQUESTED FOR: PRACTICE () PRODUCTION () BOTH ()					
1. Company Information					
Company Name			Agent Name (if applicable) - Separate ID's and letters of agency authorization are required for each company for which bids are submitted.		
Street Address			Street Address		
City	State	Zip Code	City	State	Zip Code
Person to receive Vendor ID and password			Person to receive Agent ID and password		
Method to receive Vendor ID and password: (Complete one)			Method to receive Agent ID and password: (Complete one)		
Telephone:			Telephone:		
Fax:			Fax:		
E-Mail			E-Mail		
Mail (Address)			Mail (Address)		
5-8 digit alpha/numeric personal code: (This code will be used to verify any vendor request to reset a password)			5-8 digit alpha/numeric personal code: (This code will be used to verify any agent request to reset a password)		

2. Name and Title of Person Requesting Vendor ID () or Agent ID ():
(Must be authorized on SF-129 to sign bids)

Name _____ Title _____

Signature _____ Date _____

Telephone Number _____

TO BE COMPLETED BY USDA:

VENDOR/AGENT ID ("A" and 6 digits):	PASSWORD (must change at first logon):
USDA Marketing Specialist: _____ Date: _____	

Revision No. 1 - Date: 8/22/2000

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